	2 5 06 Substitute for FORD PTO COME Application of the Company o										
	Substitute for Form PTO-875								100 701		
	RCE: CLAIMS AS FILED - PART I							1	11140		
	· FOR		UMBER F		(Column 2)	<u></u>	SMALL ENTITY		DR (OTHER THAI SMALL ENTIT	
	8ASIC FEE (37 OFR 1.16(a))				IUMBER EXTRA	- RA	TE FE	Ε	RA	IE · FF	
	TOTAL CLAIMS (37 OFR 1.16(c))	. 2	7 min	vs 20 = -		- 		- 0		,	
	(37 OFR 1.16(b))	CLAIMS	フ	3	/		<u>}.</u>	0	R x 5		
	MULTIPLE DEPENDENT CLAIM PRESENT . (37 CFR 1.16(d))					× ; 10	-	0	R x 5 20	यु	
- 1					1 +5-18	0	OF	. 36	O.		
		I the difference in column 1 is less than zero, enter "0" in column 2.					u	on	TOTA		
1	٠.	CLAIMS AS AMENDED - PART II								* L	
\vdash	101 f	(Column 1)		(Column :	2) (Column 3)	SM	LL ENTITY	OR	: OT	HER THAN	
AMENIO LOLLA	\$1918h1	REMAINING	s	HIGHEST NUMBER	PRESENT	RATE		7	· SM	ALL ENTITY	
	Total	AMENOMEN	T Minu	PREVIOUSL PAID FOR		J L	TIONAL	-	RATE	ADD-	
	(3) CFR (,16(c)) Independent (3) CFR (,166)		Minu	1-21		x s 25		OA	x.50	FEE '	
	Section 1					x s_100		OR	x , 20C		
h	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3) CFR 1.16(d))					+: 180		OR	32		
]"	7, 90 ₁					TOTAL		OR	TOTAL	1/	
H		(Column 1)	·	(Calumn 2)	(Column 3)		1		ADD'L FEE	1	
2 5		REMAINING	1	HIGHEST NUMBER PREVIOUSLY	PRESENT	RATE	ADDI:	7			
Ž.	total	AMENDMENT	Minus	PAID FOR	EXTRA		TIONAL		RATE	TIONAL	
AMENDMENT	Independent (31 OFR 1,16(0))		Minus	 	 	x s. 25.		OR	x 500=	FEE	
AM	FIRST PRECEN	TARON OCCUPANIO		L	1 1	× s 100.		OR	x s 200		
FIRST PRESENTATION OF MATIPLE DEPENDENT CLAIM (37 CFR 1.16(6))								OR	+360	†	
						ADO'L FEE		OR	TOTAL ADD'L FEE		
	· -	(Column 1)		(Column 2)	(Column 3)						
) 		REMAINING		HIGHEST NUMBER	PRESENT	0475		1 1			
ÊN	· · Total	AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA	RATE	ADDI- TIONAL	1	RATE	ADDI- TIONAL	
AMENDMENT	(3) CFR 1.14(c)) Indipendent		Minus	••	в .	x,25	FEE		KO	FEE	
ME	Us Cate s'selett	· .	Minus	•••	P	x s 100			× 200.		
¥	FIRST PRESENTATION OF THE PROPERTY OF THE PROP					180.			× ,200	· · ·	
				TOTAL		OR [. ,360.				
	" If the "Highest N	lumn I is less than	the entry	in column 2, write	"O" in column 3.	ADD1 FEE		OR ,	OD' FEE		
"If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".											

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. on the amount of time you require to complete this form and/or suggestions for returning this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, OONOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.